## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	٠,	(1/0	1015
FEE DETERMINATION	U /	64001	4/1/1/00
O.I.P.E. CLASSIFIER	450	132	41217
FORMALITY REVIEW	KK	1100029	6/8/00
RESPONSE FORMALITY REVIEW			63300

## **INDEX OF CLAIMS**

~	Rejected	N	Non-elected
=	Allowed	- 1	Interference
	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

Claim Date  Claim Date  Claim Date  Claim Date  Claim Date  Claim Date  Claim Date	Original Claim	Date
2	Final	
2	Final	
2	I I O	1 1 1 1 1 1
52		
1 52 53	101	
1 [2 1	102	
	103	
4 54	104	<del></del>
5 55	105	<del></del>
6 56	106	<del>                                     </del>
7 57	108	
8 58		<del></del>
9   59   60	109	<del></del>
10 60		<del></del>
	112	<del></del>
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14 64	114	<del></del>
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16) 66	116	<del>                                     </del>
17 67	117	<del>                                     </del>
18 68	118	<del>                                     </del>
19 69	119	<del>                                      </del>
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	121	
21 71 72 72	122	<del>                                     </del>
21 71 72 72 73 73 73 73 73 73 75 75 75 75 75 75 75 75 75 75 75 75 75	123	<del></del>
24 74 74 74	124	<del></del>
25 75	125	+
26 76 76	126	<del>- - - - -</del>
27 77 77	127	<del></del>
28 78 78	128	++++++
29   79   79	129	
301	130	<del>                                     </del>
31 81	131	<del>                                     </del>
32 82	132	<del></del>
33 83	133	
34 84	134	
35 85	135	
36 86	136	
37 87	137	
38 88	138	
39 89	139	
40 90	140	
41 91	141	
42 92	142	
43 93	143 .	
44	144	
45 (	145	
46 96	146	
47 97	147	
48 98	148	
49 99 99	149	
50 100 100	150	

If more than 150 claims or 10 actions staple additional sheet here

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